

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/352,959	07/14/99	711	2751	0100.9900940

APPLICANT

PAUL W. CAMPBELL, OAKLAND, CA.

CONTINUING DOMESTIC DATA***

VERIFIED

None PMV

371 (NAT'L STAGE) DATA***

VERIFIED

None PMV

FOREIGN APPLICATIONS***

VERIFIED

None PMV

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 08/06/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 4
Verified and Acknowledged Examiner's Initials	PMV Initials				

ADDRESS

MARKISON & RECKAMP
175 WEST JACKSON BOULEVARD
SUITE 1015
CHICAGO IL 60604

TITLE

METHOD AND APPARATUS FOR VIRTUAL ADDRESS TRANSLATION

FILING FEE RECEIVED \$874	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Commissioner for Patents
Washington, DC 20231
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CONFIRMATION NO. 2833

Bib Data Sheet

SERIAL NUMBER 09/352,959	FILING DATE 07/14/1999 RULE	CLASS 711	GROUP ART UNIT 2188	ATTORNEY DOCKET NO. 0100.9900940
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APPLICANTS

PAUL W. CAMPBELL, OAKLAND, CA;

**** CONTINUING DATA *******None PHV**** FOREIGN APPLICATIONS *******None PHV**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 08/06/1999

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	5	22	4
Verified and Acknowledged	<u>Paul Campbell</u> <u>PHV</u> Examiner's Signature Initials				

ADDRESS

23418

TITLE

METHOD AND APPARATUS FOR VIRTUAL ADDRESS TRANSLATION

FILING FEE RECEIVED 874	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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